

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 132
Registered No. 212

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ or Village _____
City Miami No. Gilmore Auto Camp St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child

Richard Herschal Scott { If child is not yet named, make supplemental report, as directed.

3. Sex of Child

Male To be answered ONLY in event of plural births.

4. Twin, triplet or other

_____ 5. No., in order of birth _____

6. Legitimate?

yes

7. Date of birth

May 4 - 1929
Month Day Year

8.

FATHER

Full name Robert Sherwood Scott

9. Residence

(Usual place of abode) Miami, Arizona
If non-resident, give place and state.

10. Color or race

Cauc

11. Age at last birthday

34 (Years)

12. Birthplace (city or place)

(State or country) New York

13. Occupation

Nature of Industry Mining

14.

MOTHER

Full maiden name Myrtle Louise Pedern

15. Residence

(Usual place of abode) Miami, Arizona
If non-resident, give place and state.

16. Color or race

Cauc

17. Age at last birthday

31 (Years)

18. Birthplace (city or place)

(State or country) Portland, Tenn.

19. Occupation

Nature of Industry Housewife

20. Number of children of this mother

3 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living

3

(b) Born alive but now dead

0

(c) Stillborn

0

21. Were precautions taken against ophthalmia neonatorum?

yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born alive at 11 A. m. on the date above stated.
(Born alive or stillborn.)

Signature Cyril M. Brown M.D.

Physician

(Physician or midwife).

Given name added from a supplemental report.

Month, day, year

Address Miami, Arizona

Filed May 12, 29

Registrar

Registrar

923-504-495

THIS IS A PRELIMINARY RECORD
SEPARATE RETURN must be made for each, and the number of each in order of birth listed.

IN CASE OF MORE THAN ONE CHILD